



REDACTED - FOR PUBLIC INSPECTION

Attachment 613013ak510.pdf



KPU Telecommunications
2970 Tongass Avenue
Ketchikan, AK 99901

Phone (907) 225-1000
Fax (907) 225-1788

The City of Ketchikan d/b/a Ketchikan Public Utilities (KPU), study area code 613013, files an annual ETC report in compliance with Alaska Administrative Code (AAC). KPU submitted our last compliance report to the Regulatory Commission of Alaska on March 27, 2014. Our company's adherence to regulations is required for certification and our compliance to State standards is presented in our annual ETC report.

Line (500) Service Quality Standards & Consumer Protection Rules Compliance

KPU certifies that it complies with the requirements set out in 3 AAC 53.450 (a) and (c) which states:

- (a) An eligible telecommunications carrier shall maintain at least one business office, with toll-free calling if necessary, staffed during commission business hours, to provide customers with access to personnel who can timely provide information on services and rates, accept and process service applications, explain and adjust bills, and generally represent the carrier
- (b) KPU respectfully requests a waiver of this subsection as it does not pertain to ILECs.
- (c) An eligible telecommunications carrier shall commit to maintaining, in an easily accessible location on the company website, consumer complaint procedures.

Attachment 613013ak610.pdf



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Ketchikan, AK 99901

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Line (600) Functionality in Emergency Situations

KPU certifies that it complies with the requirements set out in 3 AAC 53.410(a)(12) which states:

(12) a certification that the common carrier has and will continue to take steps to remain functional in emergency situations by

(A) maintaining at least eight hours of backup power to ensure functionality without local alternating current (AC) commercial power;

(B) establishing to the extent feasible the ability to reroute traffic around damaged facilities and to manage traffic spikes resulting from emergency situations; and

(C) establishing procedures for employees to follow in an emergency to prevent or minimize interruption or impairment of telecommunications services.

Attachment 613013ak920.pdf



Tribal Engagement Obligations

WC Docket 10-90- per CFR 54.313(a)(9)

1/27/14 – Letters to Lee Wallace of Organized Village of Saxman and Richard Darrington of Ketchikan Indian Community including information regarding available Lifeline program –Exhiit A – Page 1-8

10/22/2014 – Email collaboration to Lee Wallace – President/Tribal Chief – Organized Village of Saxman (OVS) – Exhibit A – Page 9-15

1/30/2015 – Email Collaboration and quote to Cheryl Capps – City of Saxman Finance Director – City of Saxman – Exhibit A – Page 16-18

3/20/15 – Email discussion regarding promotions of a 2014 cultural documentary – Lynn Quan of Ketchikan Indian Community (KIC) – Exhibit A – Page 19-20

6/3/15 – List of local film productions created in 2014 by KPU for Ketchikan Indian Community (KIC) – Exhibit A – Pages 21-29



KPU Telecommunications
2970 Tongass Avenue
Ketchikan, AK 99901

Phone (907) 225-1000
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January 27, 2014

Lee Wallace
President, Tribal Chief
Organized Village of Saxman
RR 2 Box 1
Ketchikan, AK 99901-9800

Dear Lee Wallace:

Enclosed is a copy of KPU Telecommunications FCC Form 555 – Annual Lifeline Eligible Telecommunications Carrier Certification Form. Lifeline is a federally funded program that provides discounts on local phone service to qualified low income consumers. The Lifeline Reform Order (FCC 12-11) requires eligible telecommunications carriers (ETCs) to annually re-certify the eligibility of every Lifeline subscriber. Certification is reported on the FCC Form 555. KPU is required to file the FCC Form 555 with the Federal Communications Commission, the Universal Service Administrative Company, relevant state commissions and to Tribal governments in our serving area.

As this is an annual certification we will be sending you a copy every year. In addition to the Form 555 copy, I have enclosed a Lifeline brochure and application for your information. If you have any questions about this certification or about the Lifeline Program in general, I would be happy to answer them. My contact information is listed below.

Sincerely,

Wende DeBoer
Tariff Specialist
KPU Telecommunications
907-228-5479
wended@city.ketchikan.ak.us

Enclosures
FCC Form 555
Lifeline Brochure
Lifeline Application



KPU Telecommunications
2970 Tongass Avenue
Ketchikan, AK 99901

Phone (907) 225-1000
Fax (907) 225-1788

January 27, 2014

Richard Darrington
Interim IT Director
Ketchikan Indian Community
2906 Tongass Ave
Ketchikan, AK 99901-5742

Dear Richard Darrington:

Enclosed is a copy of KPU Telecommunications FCC Form 555 – Annual Lifeline Eligible Telecommunications Carrier Certification Form. Lifeline is a federally funded program that provides discounts on local phone service to qualified low income consumers. The Lifeline Reform Order (FCC 12-11) requires eligible telecommunications carriers (ETCs) to annually re-certify the eligibility of every Lifeline subscriber. Certification is reported on the FCC Form 555. KPU is required to file the FCC Form 555 with the Federal Communications Commission, the Universal Service Administrative Company, relevant state commissions and to Tribal governments in our serving area.

As this is an annual certification we will be sending you a copy every year. In addition to the Form 555 copy, I have enclosed a Lifeline brochure and application for your information. If you have any questions about this certification or about the Lifeline Program in general, I would be happy to answer them. My contact information is listed below.

Sincerely,

Wende DeBoer
Tariff Specialist
KPU Telecommunications
907-228-5479
wended@city.ketchikan.ak.us

Enclosures
FCC Form 555
Lifeline Brochure
Lifeline Application



Lifeline Application & Certification

2417 Tongass Ave.
Suite 119D
Ketchikan AK 99901
907-228-5474
888-478-5474

Lifeline Information

Lifeline is a Federal benefit that enables qualified low-income consumers to receive discounted service on either a wireless or landline phone. Lifeline is administered by the Universal Service Administrative Company (USAC), a not-for-profit corporation under the oversight of the Federal Communications Commission (FCC).

To be eligible for Lifeline benefits you must meet certain income based qualifications or participate in at least one qualified federal assistance program. Lifeline is available for one line per household, either a wireless or a landline phone, not both. A household is defined as "any individual or group of individuals who live together at the same address and share income and expenses as an economic unit". Households are not permitted to receive Lifeline benefits from multiple providers. Violation of the one-per-household requirement constitutes a violation of the FCC's rules and will result in de-enrollment from the program and potential prosecution by the United States government.

Lifeline Eligibility

Only eligible consumers may enroll in the program. To qualify for Lifeline service, an applicant may be eligible in one of two ways:

1. An applicant's annual household income is at or below 135% of the applicable federal poverty guidelines for Alaska for a household of that size; or,
2. An applicant participates and receives benefits in one of the public assistance programs that have been approved by the Federal Communications Commission or the Regulatory Commission of Alaska.

Federal Poverty Guidelines (HHS 1/2013)		State and Federal Assistance Programs (check all that apply)		
Size of Household	Household Income (at or below)	Alaska Adult Public Assistance Program <input type="checkbox"/>	Alaska State Housing Corporation Programs <input type="checkbox"/>	Alaska Temporary Assistance Program <input type="checkbox"/>
1	\$19,373 <input type="checkbox"/>	BIA (Bureau of Indian Affairs) Gen. Assistance Program <input type="checkbox"/>	Child Care Assistance Program <input type="checkbox"/>	Denali Kid Care <input type="checkbox"/>
2	\$26,163 <input type="checkbox"/>	Federal Public Housing Assistance Program <input type="checkbox"/>	Head Start Program-Qualifying under low income criteria <input type="checkbox"/>	Home Investment Partnership Program <input type="checkbox"/>
3	\$32,954 <input type="checkbox"/>	Interest Rate Reduction for Low Income Borrowers <input type="checkbox"/>	Low Income Home Energy Assistance Program <input type="checkbox"/>	Low Income Housing Tax Credit Program <input type="checkbox"/>
4	\$39,744 <input type="checkbox"/>	Medicaid <input type="checkbox"/>	National School Lunch Program's FREE Lunches <input type="checkbox"/>	Pioneer Home Payment Assistance <input type="checkbox"/>
5	\$46,535 <input type="checkbox"/>	Senior Care <input type="checkbox"/>	Senior Citizen Housing Development Fund <input type="checkbox"/>	State of Alaska Heating Assistance Program <input type="checkbox"/>
6	\$53,325 <input type="checkbox"/>	State of Alaska Senior Benefits Program <input type="checkbox"/>	Supplemental Nutrition Assistance Program (SNAP) <input type="checkbox"/>	Supplemental Security Income (SSI) <input type="checkbox"/>
7	\$60,116 <input type="checkbox"/>	Temporary Assistance for Needy Families (TANF) <input type="checkbox"/>	Veterans Administration (VA) Disability Pension <input type="checkbox"/>	(WIC) Women, Infants and Children's Program <input type="checkbox"/>
8	\$66,906 <input type="checkbox"/>	<i>Or receives benefits from another social services assistance program that (a) uses an income-based means test to determine eligibility for benefits, or (b) is administered by the state or federal government.</i>		
each add'l person add \$6,791				

Lifeline 02/13

PLEASE NOTE: Proof of program participation must be submitted with any application for Lifeline Service based on participation in one of these programs. Acceptable documentation includes: (I) current or prior year's statement of benefits from a qualifying program; (II) a notice or letter of participation in a qualifying program; (III) program participation documents, or (IV) another official document demonstrating that the customer, one or more of the customers' dependents or the customer's household receives benefits from a qualifying assistance program. To qualify on the basis of annual household income, the applicant must provide proof of income eligibility that meets the household income criteria for Alaska. If the documentation presented does not cover a full year, such as current pay stubs, the documentation must cover at least three consecutive months within the previous twelve months.

Name			Phone Number	
Date of Birth		Last 4 digits of SSN		
Physical Address			Check here if this is your permanent address <input type="checkbox"/>	
Mailing Address				
Number of people in Household				
Household=everyone residing at the same physical address and sharing income and household expenses regardless if they are related.				
Qualifying Program(s) or Income level				
<p>By checking each box and signing below, I certify under penalty of perjury the information contained within this certification form is true and correct to the best of my knowledge:</p> <p><input type="checkbox"/> I have read the information on this certification form and understand that I must meet the qualifications listed on this form to receive assistance from this program.</p> <p><input type="checkbox"/> I understand that willfully providing false or fraudulent information to receive a Lifeline benefit is punishable by law.</p> <p><input type="checkbox"/> I understand that Lifeline is a government benefit program and willfully making false statements in order to obtain that benefit can be punished by fine or imprisonment, or that I can be barred from the program.</p> <p><input type="checkbox"/> I agree to provide documentation of my eligibility, when required to do so.</p> <p><input type="checkbox"/> By participating in this government program, I agree to provide my personal information to the national database. I understand that failure to comply will deny me the Lifeline benefit.</p> <p><input type="checkbox"/> I certify that my household is receiving no more than one Lifeline-supported service and understand that violation of this requirement will result in de-enrollment from the program and could result in criminal prosecution.</p> <p><input type="checkbox"/> I understand that I may not transfer my service to any other individual.</p> <p><input type="checkbox"/> I acknowledge that I may be required to re-certify my eligibility for Lifeline at any time and failure to re-certify my continued eligibility will result in de-enrollment and termination of Lifeline benefits.</p> <p><input type="checkbox"/> I understand that I must notify KPU Telecommunications within 30 days if I no longer qualify for Lifeline service and may be subject to penalties if I fail to do so.</p> <p><input type="checkbox"/> If I move to a new address, I agree to provide my new address to KPU Telecommunications within 30 days.</p> <p><input type="checkbox"/> I understand completion of this certification form does not constitute immediate acceptance into this program.</p>				
Signature:		Date:		
Service Provider Use only CS Rep: _____ Qualifying Persons Name: _____ Phone # for service: _____ Effective Date: _____ Database Entry Date: _____ Documentation Provided: _____				

Lifeline v. 2.15



2417 Tongass Ave. Suite 119D
Ketchikan AK 99901
907-228-5474
888-478-5474

Lifeline Household Worksheet

Name	
Physical Address	
KPU Telephone Number	

Lifeline is a government program that provides a monthly discount on home or mobile telephone services. Only ONE Lifeline discount is allowed per household. Members of a household are not permitted to receive Lifeline service from multiple telephone companies.

Your **household** is everyone who lives together at your address as one economic unit (including children and people who are not related to you).

The **adults** you live with are part of your **economic unit** if they contribute to and share in the income and expenses of the household. An **adult** is any person 18 years of age or older, or an emancipated minor (a person under age 18 who is legally considered to be an adult). Household **expenses** include food, health care expenses (such as medical bills) and the cost of renting or paying a mortgage on your place of residence (a house or apartment, for example) and utilities (including water, heat and electricity). **Income** includes salary, public assistance benefits, social security payments, pensions, unemployment compensation, veteran's benefits, inheritances, alimony, child support payments, worker's compensation benefits, gifts, and lottery winnings.

Spouses and domestic partners are considered to be part of the same household. Children under the age of 18 living with their parents or guardians are considered to be part of the same household as their parents or guardians. If an adult has no income, or minimal income, and lives with someone who provides financial support to that adult, both people are considered part of the same household.

You have been asked to complete this Worksheet because someone else currently receives a Lifeline-supported service at your address. This other person may or may not be a part of your household. Answer the questions below to determine whether there is more than one household residing at your address.

1. Does your spouse or domestic partner (that is, someone you are married to or in a relationship with) already receive a Lifeline-discounted phone? (check no if you do not have a spouse or partner)
____ YES ____ NO
➤ If you checked YES, you may not sign up for Lifeline because someone in your household already receives Lifeline. Only ONE Lifeline discount is allowed per household.
➤ If you checked NO, please answer question #2.
2. Other than a spouse or partner, do other adults (people over the age of 18 or emancipated minors) live with you at your address?
 - A. A parent ____ YES ____ NO
 - B. An adult son or daughter ____ YES ____ NO
 - C. Another adult relative ____ YES ____ NO
(such as a sibling, aunt, cousin, grandparent, grandchild, etc.)
 - D. An adult roommate ____ YES ____ NO
 - E. Other ____ YES ____ NO
➤ If you checked NO for each statement in question 2, you do not need to answer the remaining questions. Please initial line B, below, and sign and date the worksheet.
➤ If you checked YES for any statement in question 2, please answer question #3.

3. Do you share living expenses (bills, food, rent, etc.) and share income (either your income, the other person's income or both incomes together) with at least one of the adults listed in question #2?

____ YES ____ NO

- If you checked **NO**, then your address includes **more than one household**. Please initial lines A and B below, and sign and date the worksheet.
- If you checked **YES**, then your address includes only **one household**. You may not sign up for Lifeline because someone in your household already receives Lifeline.

CERTIFICATION

Please initial the certifications below and sign and date this worksheet.

Submit this worksheet to KPU Telecommunications along with your Lifeline application.

A. _____ I certify that I live at an address occupied by multiple households.

B. _____ I understand that violation of the one-per-household requirement is against the Federal Communication Commission's rules and may result in me losing my Lifeline benefits, and potentially, prosecution by the United States government.

Signature: _____

Date: _____

Low-Income Telephone Assistance Program

Lifeline

Lifeline is a Federal benefit that assists qualified low-income applicants by providing a monthly reduction on their local telephone bill.

You may only receive low-income assistance from one wireline or wireless telephone provider per household.*

*NOTE:

A "Household" is defined as any individual or group of individuals who are living together at the same address as one economic unit. An "economic unit" consists of all adult individuals contributing to and sharing in the income and expenses of a household.

Eligibility Requirements

To be eligible for Lifeline assistance, you must meet income-based criterion currently defined as at or below 135 % of the Federal Poverty Guidelines (see table inside) OR participate in at least one of the following programs:

- Medicaid
- Supplemental Nutrition Assistance Program (SNAP)
- Supplemental Security Income (SSI)
- Federal Public Housing Assistance
- Low-Income Home Energy Assistance Program (LIHEAP)
- Temporary Assistance to Needy Families Program (TANF)
- National School Lunch Program (NSL)
- Alaska Adult Public Assistance Program
- Alaska State Housing Corp. Programs
- Alaska Temporary Assistance Program
- **Other programs apply – See Lifeline application for a complete list.**

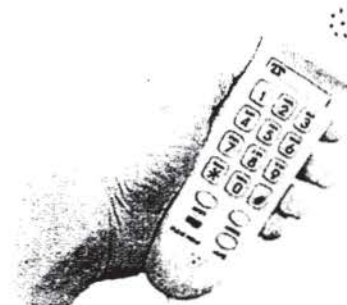
In addition, you must not currently be receiving Lifeline assistance and no other person in your household can be subscribed to the Lifeline program.

To Apply for Lifeline:

1. Complete a KPU Lifeline certification form, (please include any supporting documents) and submit it to the KPU Telecommunications Customer Service office at 2417 Tongass Ave - Suite 119D - at the Plaza.
2. Re-certification forms are mailed to all subscribers every year. When you receive a re-certification form, complete and return it to KPU Telecommunications within 30 days. KPU Telecommunications is required to suspend your eligibility for low-income assistance if you do not return the re-certification form.

Federal Government Lifeline Program for Low-Income Telephone Assistance

Revised: Feb 2013



KPU Telecommunications
2417 Tongass Ave
Suite 119D
At the Plaza
Your Local Telephone Company

135 percent of Federal poverty guidelines

Alaska

(As of Jan 2013)

Number of people living in home	Household Income (at or below)
1	\$19,373
2	\$26,163
3	\$32,954
4	\$39,744
5	\$46,535
6	\$53,325
7	\$60,116
8	\$66,906
* For each additional person	Add \$6,791

Application Checklist

Please provide the following
information:

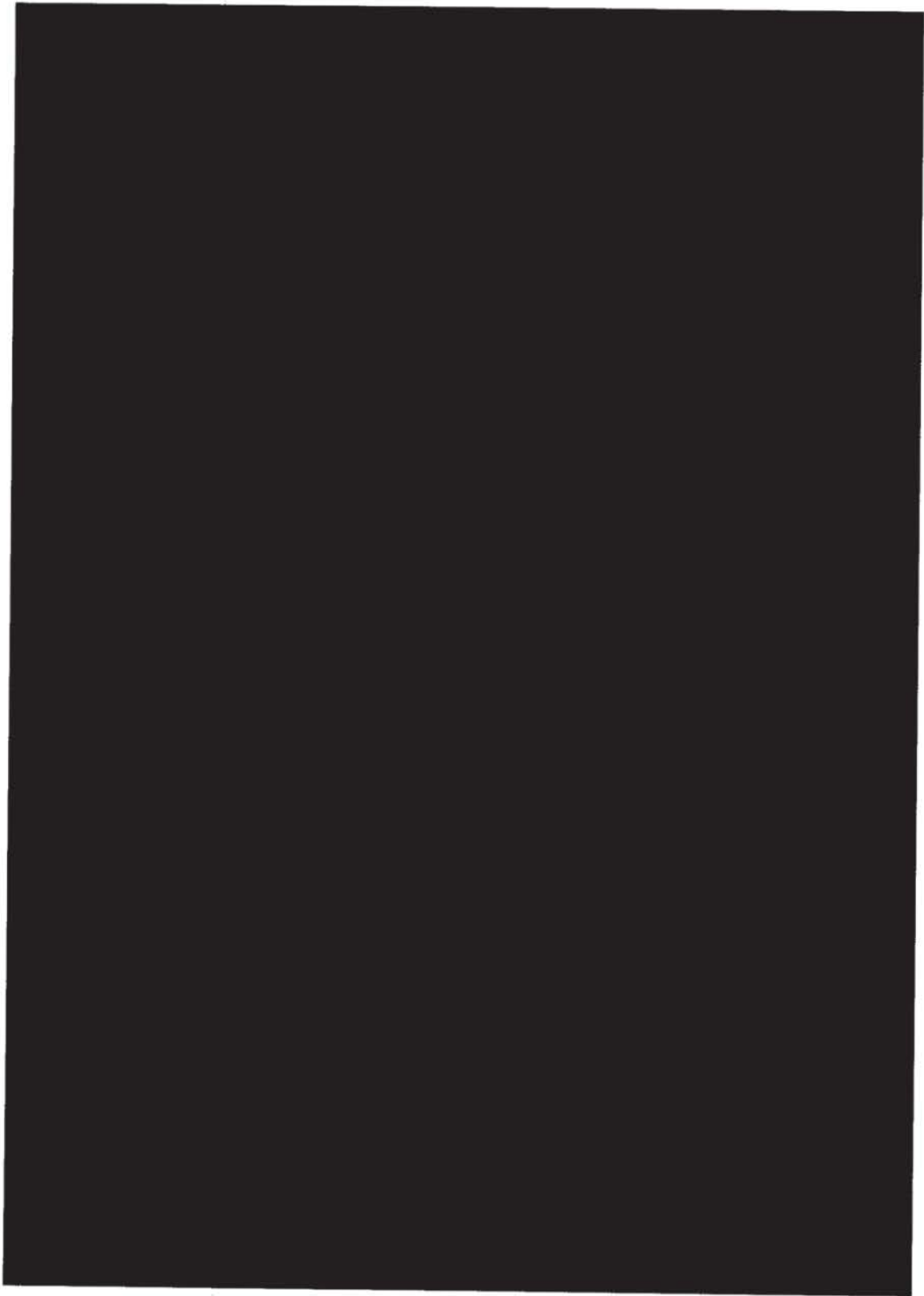
1. A signed and completed Lifeline assistance certification form.
2. A copy of one of the following if applying based on the size and income level of a customer's household:
 - Last year's federal or state income tax return
 - Current annual income statement from employer
 - Paycheck stubs for most recent three consecutive months
 - Social Security statement of benefits
 - Veteran's Administration statement of benefits
 - Retirement or pension statement of benefits
 - Unemployment or worker's compensation statement of benefits
 - Letter of participation in general assistance
 - Divorce decree or child support documentation

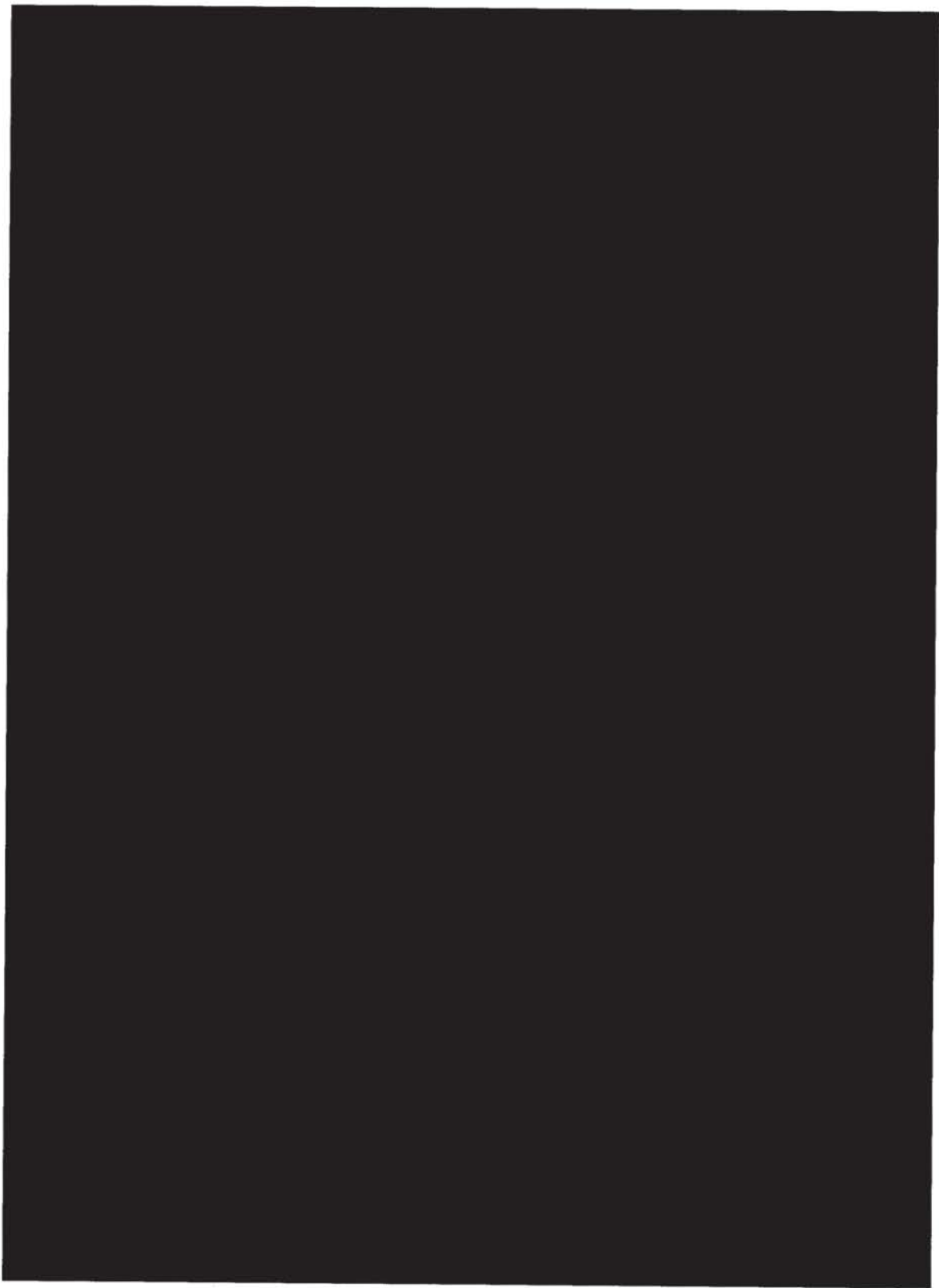
3. Supporting documentation of program-based eligibility if applying based on participation in any programs listed on the back of this brochure, or on the Lifeline application.

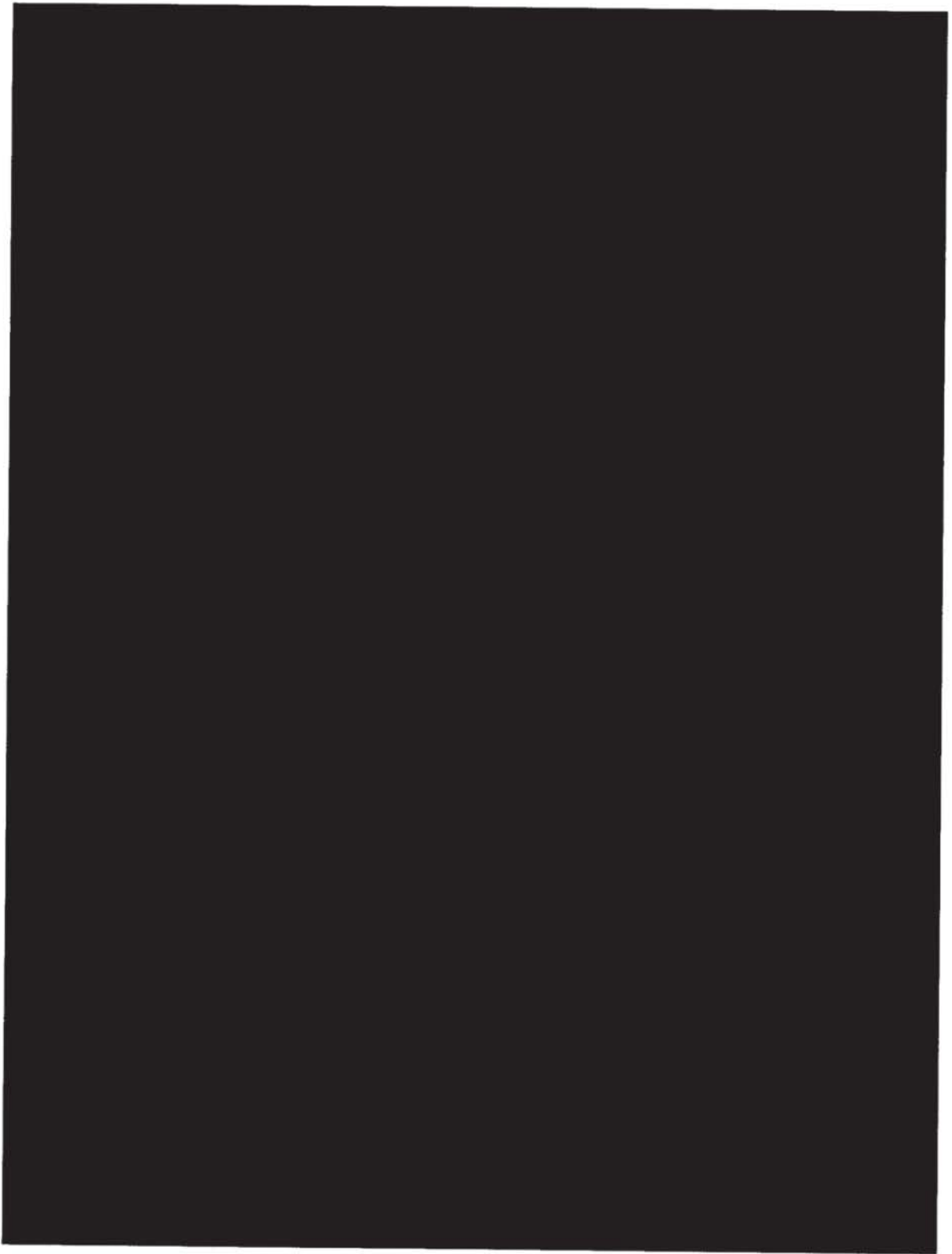
Acceptable documentation of program eligibility includes the current or prior year's statement of benefits from a qualifying assistance program, a recent notice, letter or documents of participation in a qualifying assistance program, or another official document demonstrating that you, or one or more of your dependents, or your household receives benefits from a qualifying assistance program. **These documents are needed for verification only and will not be kept or stored by KPU Telecommunications.**

For questions, please call
KPU Telecommunications
(907) 228-5474 or
Toll-free (888) 478-5474

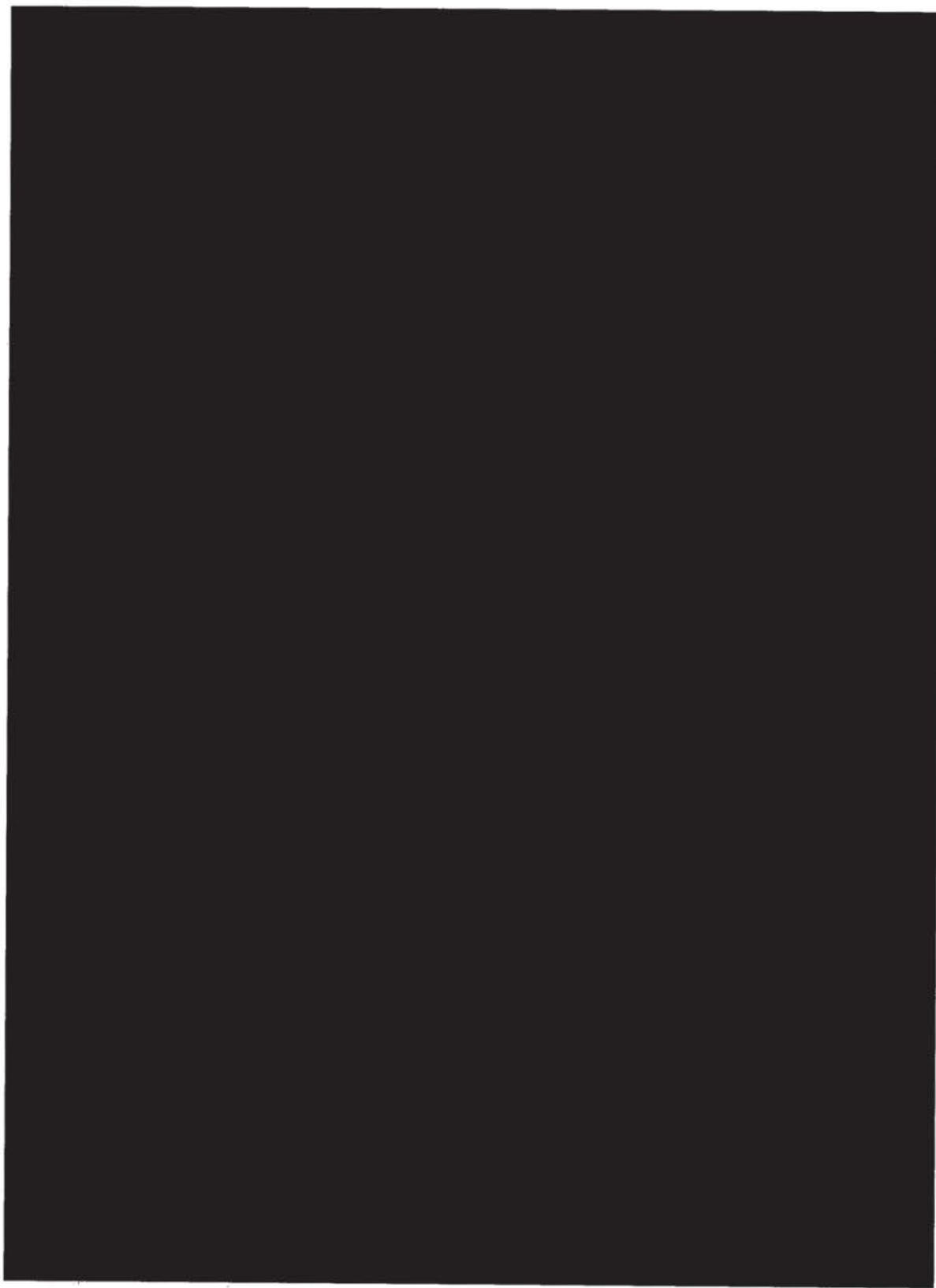






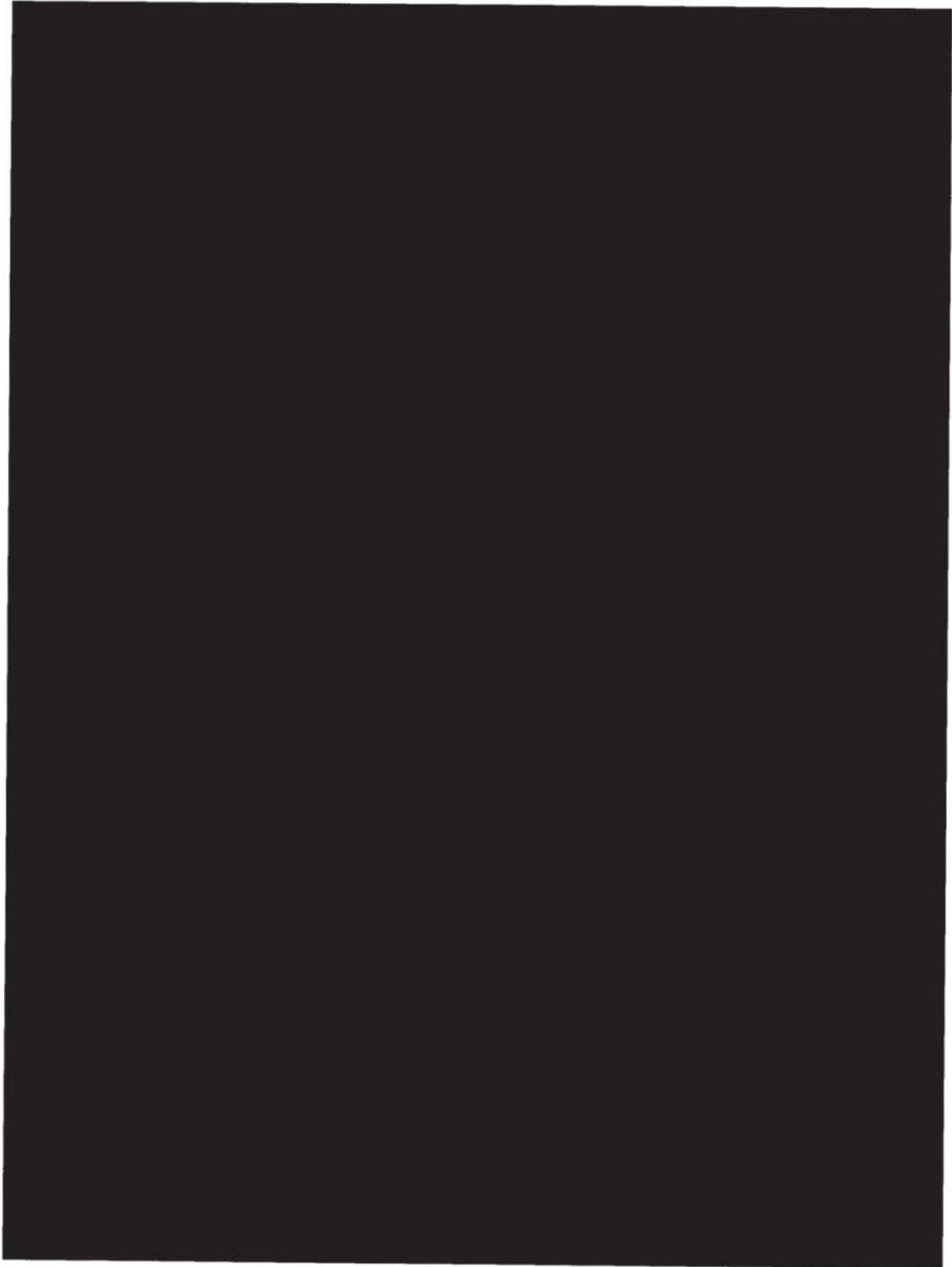






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